

# SHARE

STATE OF NEW MEXICO

DEPARTMENT OF FINANCE AND ADMINISTRATION

## Warrant/Voucher Information Sheet

747

VENDOR #

DATE 08/24/2012

Payee

\$ 695.00



Fund / Agency

000 66500

Document Number

AP 00306084

B4R

COD3

B4RCOD3

State of New Mexico  
Voucher Batch Report  
BusinessUnit 66500 Department of Health  
Vouchers with Final Agency Approval But Not Yet Reviewed/Approved By DFA/FCD  
AsofDate 08/20/2012

Voucher	Vchr	VchrLineDescr	Distr Account	Account	Fund	VendorName	1099	Accounting Period	PurchaseOrder	Invoice Number	Total Amount
Number	Line		Line#	Description			WithHold	Year	Month		
00306084	1	IS Meals & Lodging	1	542200 Employee I/S Meals & L	06101	MCGRATH BR-001		2013	08	0000092324 McGrath, B. 8.6-	695.00
										Total For Voucher	695.00

FCD Audit Bureau  
*Mycoidera*

2012 AUG 21 AM 10:45  
DFA  
FINANCIAL CONTROL

AGENCY NAME New Mexico Department of Health

STATE OF NEW MEXICO  
ITEMIZED SCHEDULE  
OF TRAVEL EXPENSES

PAGE 2

DATE 8/6/12

AGENCY CODE 66500

VOUCHER NUMBER

00306084

NAME <u>Brad McGrath</u>	CAR LICENSE NUMBER <u>GS02222</u>	POST OF DUTY <u>Roswell</u>	PROPOSED (ADVANCE VOUCHER) <input type="checkbox"/>
SOCIAL SECURITY NUMBER <u>[REDACTED]</u>	MODEL <u>Ford</u>	RESIDENCE <u>Roswell</u>	ACTUAL (RECOUPMENT VOUCHER) <input checked="" type="checkbox"/>
NORMAL WORK DAY <u>8am</u> TO <u>5pm</u>	YEAR <u>2011</u>		

DATE	TIME SHOW AM OR PM		CHARACTER OF EXPENDITURES ENTER DESTINATION, NATURE, OF OFFICIAL BUSINESS, PARTY CONTACTED AND MISCELLANEOUS	ODOMETER READINGS		AMOUNTS			
	DEPARTURE	ARRIVAL		ENTER START AND FINISH	NO. OF MILES	MILEAGE	PER DIEM	MISCELLANEOUS	TOTALS
8/6/12	7:00am		Depart Roswell to Santa Fe to meet with Cabinet Secretary and OFM staff Overnight Santa Fe rates apply*				135.00		135.00
8/7/12			Overnight Santa Fe rates apply*				135.00		135.00
8/8/12			Overnight Santa Fe rates apply*				135.00		135.00
8/9/12			Overnight Santa Fe rates apply*				135.00		135.00
8/10/12			Overnight Santa Fe rates apply*				135.00		135.00
8/11/12		4:00pm	Depart Santa Fe to Roswell. Partial day per diem 20.00				20.00		20.00

PER DIEM IS BASED ON (CHECK ONE)

ACTUAL ☐

APPROVED RATES ☒

I certify that any payment sought on this voucher does not include reimbursement for alcoholic beverages; I further certify that no further payment will be sought for the travel/training covered by this voucher.

Employee Signature

Date

TOTALS

Advance Amount @ 30%

Adjusted Reimbursement

695.00

695.00

☒ Check here if this claim is in compliance with the Nonroutine Reassignment provisions of the DFA regulations Governing the PerDiem and Mileage Act.

I, Brad McGrath

do solemnly swear that the above claim for reimbursement is just and true in all respects and complies with the DFA Regulations Governing the Per Diem and Mileage Act.

PAYEE SIGN HERE

X

[Signature] 08/13/12

AUG 13 '12 946:23

[Summary](#) | [Invoice Information](#) | [Payments](#) | [Voucher Attributes](#) | [Error Summary](#)

Business Unit: 66500

Voucher ID: 00306084


Voucher Style: Regular

Invoice Number: McGrath, B. 8.6-8.11.12

Invoice Date: 08/13/2012



Total: 695.00

Vendor: MCGRATH, BRADLEY K  
OFFICE OF FACILITIES MANAGEMENT  
SANTA FE, NM 87502

\*Pay Terms: [Pay Now](#)  [Schedule Payments](#)

**Saved**

## Payment Information

Find | View All First  1 of 1  Last 

Scheduled Payment: 1


\*Remit to:   Location: 001 \*Address: 1 

MCGRATH, BRADLEY K  
OFFICE OF FACILITIES MANAGEMENT  
1190 S ST FRANCIS DR SUITE N-3059  
SANTA FE, NM 87502

Gross Amount: 695.00 USD

Discount: 0.00 USD ☐ Discount Denied

Late Charge

Scheduled Due: 08/13/2012 

Net Due: 08/13/2012

Discount Due:

Accounting Date:

## Payment Method


\*Bank: WFB10

\*Account: B

\*Method: CHK Check

Pay Group:

\*Handling: RE

\*Netting: N 

Message:

[Messages](#)

Message will appear on remittance advice.

[New Window](#) | [Help](#) | [Customize Page](#) | [Summary](#) | [Invoice Information](#) | [Payments](#) | [Voucher Attributes](#) | [Error Summary](#)

Business Unit: 66500

Invoice Number: McGrath, B. 8.6-8.11.12

Voucher ID: 00306084

Invoice Date: 08/13/2012

Voucher Style: Regular

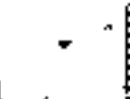
Total: 695.00

## Voucher Processing

☒ Post Voucher☐ Close Voucher☒ Revalue Voucher☐ Delete Voucher

Saved

## Accounting Instructions

\*Accounting Template: STANDARD Account At: Gross 

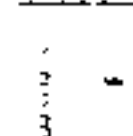
## Match Action

\*Status:


Ready ☐ Pay UnMatched Voucher

## Transaction Currency

\*Source:

Tables 

\*Currency: USD

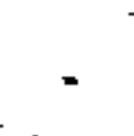


Rate Type: CRRNT 

Exchange Rate:

1.00000000

## Voucher Approval

\*Approval:

Specify at this Level Business Process: PROCESS\_VOUCHERS Approval Rule Set: Payment Approval Rule Set 1 

## Self Billing Invoice

\*SBI Num Option: Group Vouchers (Auto-Nur

SBI Number:

## Prepayment

Prepayment Reference: ☒ Automatically Apply Prepayment☐ Postpone Withholding

## Letter of Credit

Letter of Credit ID: 

## Tax Group